

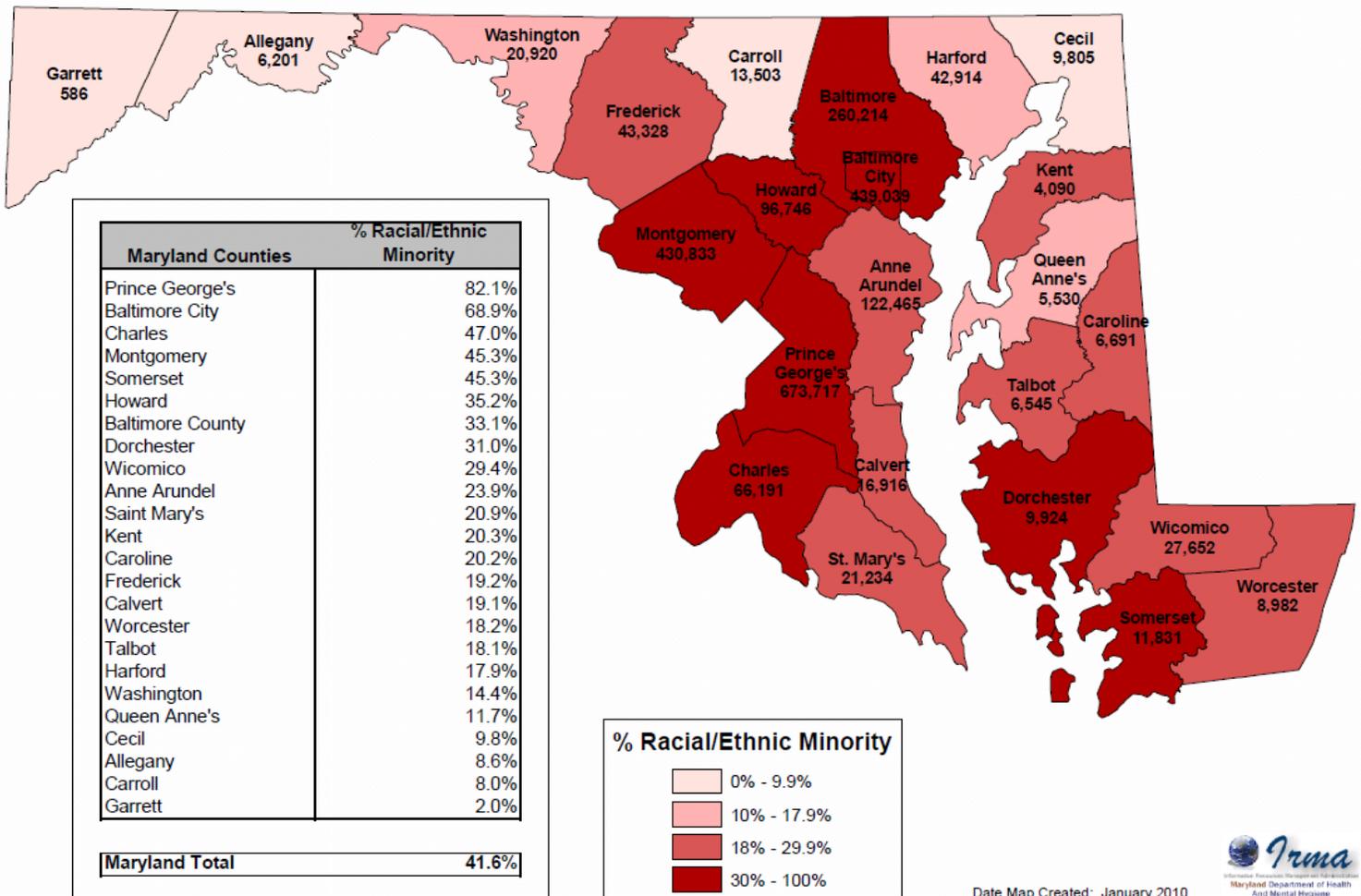


Minority Health and Health Disparities
 Maryland Department of Health and Mental Hygiene

Maryland Minority Health Disparities Selected Statewide and Carroll County Data

February 11, 2011

Racial or Ethnic Minority Population (Number and Percent), by Jurisdiction, Maryland 2008



Date Map Created: January 2010

Minority Population in Maryland

- Maryland is a state where the combined racial and ethnic minority population is approaching the Non-Hispanic White population. The 2008 estimated Maryland population was 41.6% minority, up by 0.3 percentage points from 2007 (41.3%).
- Eight of Maryland's 24 jurisdictions have minority populations over 30%. More than 20% of the population in the Eastern Shore is minority.

Table 1. Maryland Population, July 1, 2008 by Race and Ethnicity

Race	All Ethnicity		Non-Hispanic		Hispanic	
White	3,611,787	64.1%	3,287,740	58.4%	324,047	5.8%
Non-White	2,021,810	35.9%	1,970,027	35.0%	51,783	0.9%
<i>Black</i>	1,692,495	30.0%				
<i>Asian/Pac Isle</i>	305,847	5.4%				
<i>American Indian</i>	23,468	0.4%				
MD Total	5,633,597	100.0%	5,257,767	93.3%	375,830	6.7%

Source: Maryland Vital Statistics Annual Report 2008

Table 2. Minority Population by Jurisdiction, Maryland 2008

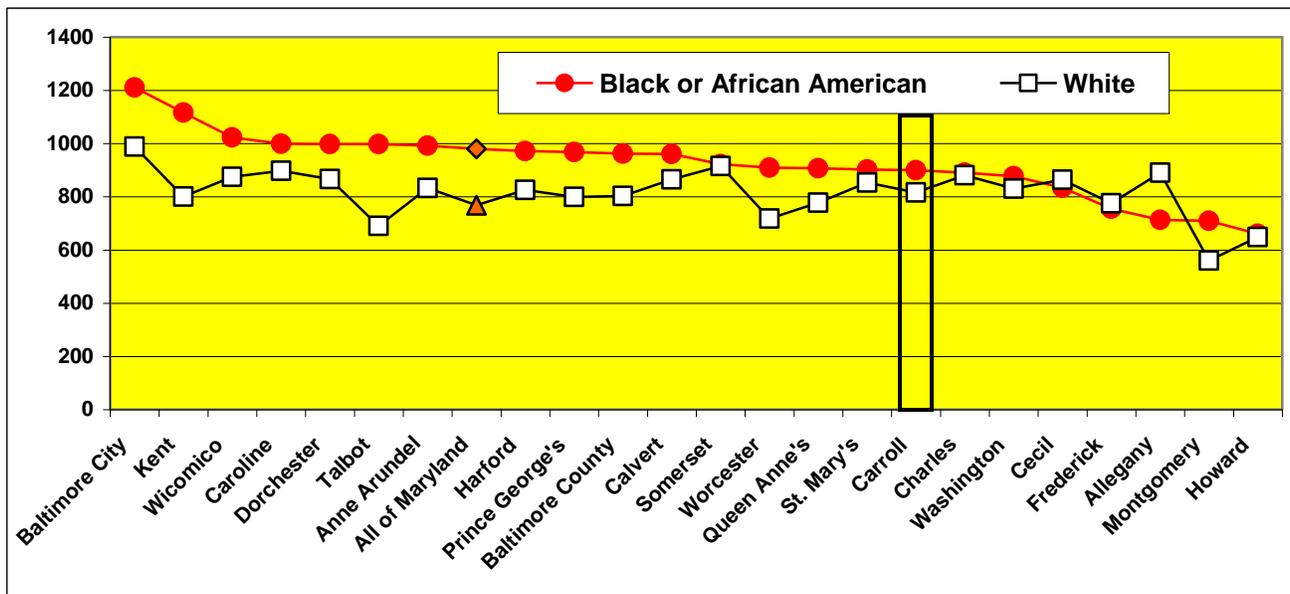
REGION AND POLITICAL SUBDIVISION	TOTAL	Non Hispanic White	Minority Population	Percent Minority	Percent African American	Percent Asian/PI	Percent AI/AN	Percent Hispanic
MARYLAND	5,633,597	3,287,740	2,345,857	41.6%	30.0%	5.4%	0.4%	6.7%
NORTHWEST AREA	473,041	402,006	71,035	15.0%	8.7%	2.5%	0.3%	3.9%
GARRET	29,698	29,112	586	2.0%	1.0%	0.2%	0.1%	0.7%
ALLEGANY	72,238	66,037	6,201	8.6%	6.8%	0.7%	0.2%	1.1%
WASHINGTON	145,384	124,464	20,920	14.4%	10.2%	1.5%	0.2%	2.7%
FREDERICK	225,721	182,393	43,328	19.2%	9.4%	3.9%	0.3%	6.0%
BALTIMORE METRO AREA	2,620,026	1,645,145	974,881	37.2%	29.8%	4.2%	0.4%	3.4%
BALTIMORE CITY	636,919	197,880	439,039	68.9%	64.3%	2.2%	0.4%	2.7%
BALTIMORE COUNTY	785,618	525,404	260,214	33.1%	25.6%	4.5%	0.4%	3.1%
ANNE ARUNDEL	512,790	390,325	122,465	23.9%	15.9%	3.5%	0.4%	4.5%
CARROLL	169,353	155,850	13,503	8.0%	4.2%	1.8%	0.2%	1.9%
HOWARD	274,995	178,249	96,746	35.2%	18.0%	12.4%	0.3%	5.0%
HARFORD	240,351	197,437	42,914	17.9%	12.8%	2.4%	0.3%	2.7%
NATIONAL CAPITAL AREA	1,771,532	666,982	1,104,550	62.3%	40.3%	9.6%	0.5%	13.9%
MONTGOMERY	950,680	519,847	430,833	45.3%	17.5%	14.2%	0.5%	14.8%
PRINCE GEORGE'S	820,852	147,135	673,717	82.1%	66.7%	4.3%	0.6%	12.8%
SOUTHERN AREA	331,040	226,699	104,341	31.5%	25.7%	2.4%	0.6%	3.2%
CALVERT	88,698	71,782	16,916	19.1%	14.8%	1.6%	0.4%	2.5%
CHARLES	140,764	74,573	66,191	47.0%	39.9%	2.8%	0.8%	3.9%
SAINT MARY'S	101,578	80,344	21,234	20.9%	15.4%	2.4%	0.4%	2.9%
EASTERN SHORE AREA	437,958	346,908	91,050	20.8%	16.8%	1.2%	0.3%	2.9%
CECIL	99,926	90,121	9,805	9.8%	6.1%	1.1%	0.4%	2.4%
KENT	20,151	16,061	4,090	20.3%	16.1%	0.8%	0.2%	3.6%
QUEEN ANNE'S	47,091	41,561	5,530	11.7%	8.4%	1.2%	0.2%	2.1%
CAROLINE	33,138	26,447	6,691	20.2%	14.6%	0.8%	0.6%	4.8%
TALBOT	36,215	29,670	6,545	18.1%	14.1%	1.0%	0.2%	3.2%
DORCHESTER	31,998	22,074	9,924	31.0%	27.9%	1.0%	0.2%	2.2%
WICOMICO	94,046	66,394	27,652	29.4%	24.3%	1.8%	0.2%	3.4%
SOMERSET	26,119	14,288	11,831	45.3%	42.1%	0.9%	0.4%	2.4%
WORCESTER	49,274	40,292	8,982	18.2%	14.8%	1.0%	0.2%	2.4%

Source: Maryland Vital Statistics Annual Report 2008

As in Maryland Overall, Racial Disparities Exist in Carroll County

Similar to 19 other Maryland jurisdictions, the Black/African American All-Cause mortality rate exceeded the White All-Cause mortality rate in Carroll County for 2004 to 2006 combined (*exceptions are Allegany, Cecil, and Frederick counties as seen in Figure 1*).

Figure 1. Age-Adjusted All-Cause Mortality (rate per 100,000) by Black or African American and White Race and Jurisdiction, Maryland 2004- 2006 Combined.

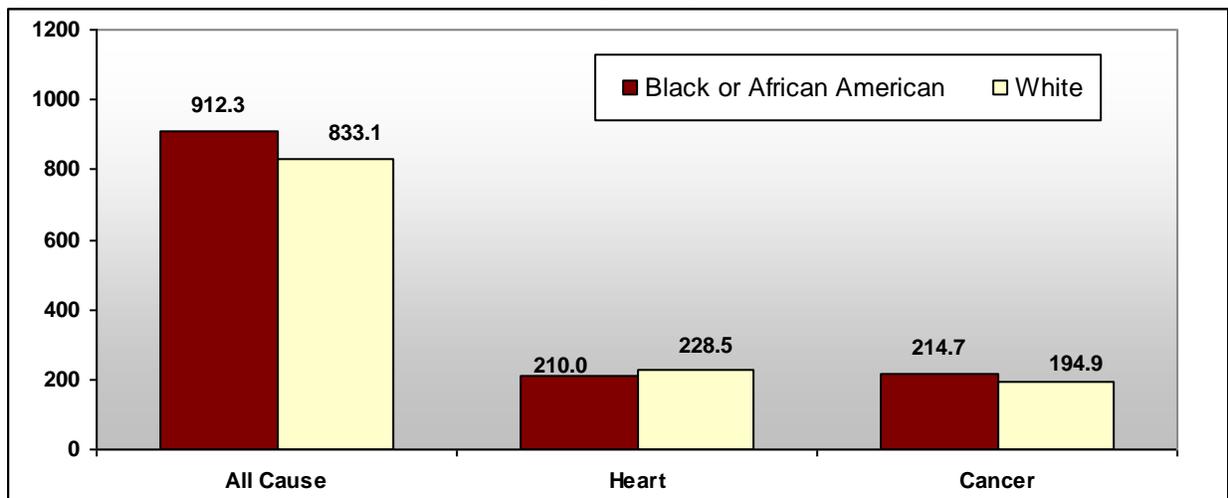


Age-adjusted death rates for Blacks/AA could not be calculated for Garrett County.
 Source: CDC Wonder online Database, Compressed Mortality Files 2004-2006.

Disease Areas Where Disparities Exist

From 2002 to 2006, Blacks or African Americans in Carroll County had higher rates of mortality than Whites for **all cause mortality**, and **one out of the top two** causes of death (*exception is heart disease as seen in Figure 2 and Table 3*). The number of deaths among Blacks in Carroll County for other causes of death was too low to calculate statistically stable mortality rates for comparison.

Figure 2. Age-Adjusted Mortality Rates (per 100,000), Selected Causes of Death for Blacks or African Americans and Whites, Carroll County, Maryland 2002-2006 Pooled.



Source: CDC Wonder online Database, Compressed Mortality Files 2002-2006.

Description of Health Disparities in Carroll County

The mortality ratio disparity in Carroll County could only be determined for all cause mortality, for heart disease, and for cancer (*see Table 3*). Both all cause mortality and cancer mortality were 10% higher for Blacks or African Americans than for Whites.

Comparing death rates between African Americans and Whites in Carroll County (2002 to 2006), African American death rates were (*see Table 3*):

10% higher for all causes of death,

10% higher for cancer,

Table 3. Black or African American vs. White Mortality Disparity, Leading Causes of Death, Carroll County Maryland, 2002-2006 Combined.

Disease	Rates are deaths per 100,000 population			Black % Excess	Black Excess Death Rate
	Black	White	B/W Ratio		
All Cause	912.3	833.1	1.10	10%	79.2
Heart Disease	210.0	228.5	0.92	N/A*	N/A*
Cancer	214.7	194.9	1.10	10%	19.8
Stroke	<i>(Statistically sound Black mortality rates could not be calculated for the other conditions)</i>				
Chronic lung Disease					
Diabetes					
HIV/AIDS					
Liver Diseases					
Kidney diseases					
N/A* means White death rate is higher.					

Source: CDC Wonder online Database, Compressed Mortality Files 2002-2006

Infant Mortality is also an issue in Carroll County

In Carroll County in 2009, the **infant mortality rate** (deaths per 1000 live births) for Whites was 4.0. With only one infant death among Blacks, a calculate rate for Black infant mortality is statistically unstable and thus not presented.

TABLE 33. INFANT DEATHS AND INFANT MORTALITY RATES BY RACE, HISPANIC ORIGIN, REGION AND POLITICAL SUBDIVISION, MARYLAND, 2009.

REGION AND POLITICAL SUBDIVISION	NUMBER OF INFANT DEATHS				INFANT MORTALITY RATES***			
	ALL RACES	WHITE*	BLACK*	HISPANIC**	ALL RACES	WHITE*	BLACK*	HISPANIC**
MARYLAND.....	541	177	343	29	7.2	4.1	13.6	3.1
NORTHWEST AREA.....	25	17	7	1	4.4	3.5	14.5	****
GARRETT.....	0	0	0	0	****	****	****	****
ALLEGANY.....	1	1	0	0	****	****	****	****
WASHINGTON.....	13	8	5	0	7.4	5.2	30.9	****
FREDERICK.....	11	8	2	1	3.8	3.4	****	****
BALTIMORE METRO AREA.....	275	76	191	10	8.0	3.9	15.8	3.7
BALTIMORE CITY.....	128	10	118	2	13.5	3.5	18.5	****
BALTIMORE COUNTY.....	73	21	48	2	7.4	3.6	15.3	****
ANNE ARUNDEL.....	35	22	12	1	4.9	4.1	9.0	****
CARROLL.....	7	6	1	0	4.5	4.0	****	****
HOWARD.....	23	12	9	5	6.9	6.2	12.9	13.4
HARFORD.....	9	5	3	0	3.2	2.3	****	****

Source: Maryland Vital Statistics Annual Report 2009

To evaluate infant mortality disparity in Carroll County, we pooled data from 2004 to 2008. The infant mortality rate (per 1000 live births for the five-year period in Carroll County was 21.5 among Blacks compared to 3.3 among Whites, with the infant mortality rate being 6.5 times higher among Blacks in Carroll County.

What about other minorities?

In the sections which follow Table 2, some reporting is limited to comparisons of the Black or African American population to the White population. Where data are not presented for American Indians, Asians and Pacific Islanders, or Hispanics/Latinos, this is because either

- The data have small numbers for these populations, generating statistically unstable estimates,
- The data have large numbers of persons who are missing race or ethnicity information. This creates a large potential for error in estimating the smaller racial and ethnic groups, or
- The data have other technical limitations (misclassification, issues of outmigration, etc.) where the estimates generated are likely to not reflect the true disease burden in these smaller populations.

Priority Areas for Action

Cardiovascular and related diseases which refers to the inter-related cluster of **heart disease, stroke, diabetes, and kidney disease**. All of these conditions share poor diet, physical inactivity and obesity as risk factors. Two thirds of end-stage kidney disease is caused by diabetes or high blood pressure.

While for heart disease in Carroll County, White rates were higher than Black rates, this is the reverse of what is seen in most other jurisdictions. Heart disease is the leading cause of death in Carroll County, and is a priority even if there is no disparity.

Cancer is most likely the top disparity in Carroll when looked at as the difference between death rates.

Infant mortality is a particularly tragic disparity, with many years of potential life lost. It also is a marker of wider gaps in our health care system.

Strategies for Eliminating Health Disparities

- Addressing insurance and access disparities,
- Ensuring cultural/linguistic competence and diversity in the health workforce,
- Supporting community education and community outreach worker programs,
- Enacting equity-promoting policies

are among the strategies required for the elimination of health disparities.